PART B - FEE(S) TRANSMITTAL

Complete and send this form, together we

applicable fee(s), to: Mail Mail Stop ISSUL FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

nnronriate All further	correspondence includir ed below or directed oth	ng the Patent advance o	rders and notification of n a) specifying a new corres	naintenance fees w	rill be mailed to t	he current c	orrespondence address as	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
30480	7590 09/12	•		•		iccion		
EDWARD S. SHERMAN, ESQ.				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United				
3554 ROUND B			State	es Postal Service we ressed to the Mail	ith sufficient post Stop ISSUE FE	age for first E address a	class mail in an envelope bove, or being facsimile e indicated below.	
SUITE 303			trans	smitted to the USP	TO (571) 273-288:	5, on the dat	e indicated below.	
SANTA ROSA, CA 95403			· [KDULA	AD 152	CHER	(Depositor's name)	
9/29/2006 WASFAW2 00000058 10762631			°	Gill	ust		(Signature)	
1 FC:2501 700.00 OP				Se	x 25, 6	2006	(Datc)	
APPLICATION NO.	FILING DATE	· ·	FIRST NAMED INVENTOR		ATTORNEY DOC	KET NO.	CONFIRMATION NO.	
10/762,631	01/21/2004		Margaret Slone	115.0 INP			5025	
TILE OF INVENTION	: SHELTER FOR SMAI	LL ANIMALS AND PET	rs .					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE TOTAL F	EE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	\$300	\$0	\$1	000	12/12/2006	
EXAMINER ART UNIT			CLASS-SUBCLASS					
SMITH, KIMBERLY S 3644			119-501000					
. Change of corresponde FR 1.363).	ence address or indication	n of "Fee Address" (37	2. For printing on the pa			Dim A Di	DS. SHERMAN	
_ ′	ondence address (or Cha 3/122) attached.	nge of Correspondence	or agents OR, alternatively,					
☐ "Fee Address" ind	ication (or "Fee Address' 2 or more recent) attach	" Indication form	registered attorney or a 2 registered patent attor	te name of a single firm (having as a member a lered attorney or agent) and the names of up to listered patent attorneys or agents. If no name is length, no name will be printed.				
. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ne)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
(b) RESIDENCE. (CITT and STATE OR COUNTRY)								
lease check the appropri	iate assignee category or	categories (will not be pr	rinted on the patent):	Individua! Co	rporation or other	private grou	p entity	
a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.								
Publication Fee (N			(a) a dags	-:				
☐ Advance Order - #	of Copies		The Director is hereby overpayment, to Depos	sit Account Number	er	(s), any den (enclose an	extra copy of this form).	
. Change in Entity Stat	tus (from status indicated	d above)	_					
	s SMALL ENTITY statu		b. Applicant is no long	-				
OTE: The Issue Fee and terest as shown by the r	d Publication Fee (if requeecords of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than the Office.	he applicant; a regi	stered attorney or a	agent; or the	assignee or other party in	
Authorized Signature	Elw	yu		Date	1/25/200	6	•	
Typed or printed name EDWARD S: SHERWAN Registration No. 43, 115								
his collection of information application. Confident	ation is required by 37 C tiality is governed by 35	FR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or re 1.14. This collection is esti-	etain a benefit by the imated to take 12 midual case. Any control	ne public which is ninutes to complet	to file (and be, including	by the USPTO to process) gathering, preparing, and	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.